Central Contractor Registration (CCR) Tools Access Form for U.S. Government Employees

Please Mail or FAX this form to:

Mail: DLIS-VSM (CCR Tools Access) Defense Logistics Information Service 74 Washington Ave N, STE 7 Battle Creek MI 49017-3084.

Block 1. Agency Information

<u>FAX:</u> DSN: 932-5925

Commercial: 616-961-5925

Instructions for completing this form

This is a Department of Defense (DoD) computer system. DoD computer systems are provided for the processing of official U.S. Government information only. All data contained on DoD computer systems is owned by the Department of Defense, may be monitored, intercepted, recorded, read, copied, or captured in any manner and disclosed in any manner, by authorized personnel. There is no right to privacy in this system. System personnel may give to law enforcement officials any potential evidence of crime found on DoD computer systems. Use of this system by any user, authorized or unauthorized, constitutes consent to this monitoring, interception, recording, reading, copying, or capturing and disclosure.

U.S. Government Branch of Service or Agency	_
Major Command:	
Office Symbol, Code, Mail Stop:	
Organization:	-
Street/PO Box	
City/State/Zip Code:	_
City/Country (if APO or FPO address):	_

Block 2. CCR Tools User Information.

This form requests that you provide your social security number. The U.S. Government is authorized to ask for this information under Executive Orders 9397, 10450 and 0577 sections 3301 and 3302 of title 5, U.S. Code and parts 4, 731 and 736 of Title 5, Code of Federal Regulations. Your social security number is needed to keep records accurate, because other people may have the same name. The primary use of the information on this form is for review by Government Officials to determine and verify that you have the appropriate security clearance to obtain access to the requested data. Disclosure is voluntary. However, failure to provide the requested information may result in denial of access.

As a user of Central Contractor Registration Tools, I acknowledge my responsibility to conform to the following requirements and conditions as established by DLA:

I understand the need to protect my password. I will NOT share my password and/or account.

I understand that I am responsible for all actions taken under my account. I will NOT attempt to 'hack" the network or any connected information system or network, or attempt to gain access to data for which I am not specifically authorized.

I acknowledge my responsibility to comply with all copyright laws both federal and state (where applicable).

I understand my use of Defense Logistics Agency information systems is subject to monitoring to ensure proper functioning, to protect against improper or unauthorized use or access, and to verify the presence or performance of applicable security features or procedures. By using the information system I consent to such monitoring.

I acknowledge my responsibility to conform to the requirements stated above when using DLA information systems or networks. I also acknowledge that failure to comply with these requirements and conditions may constitute a security violation resulting in denial of access to DLA information systems, networks or facilities and that such violations will be reported to appropriate authorities for further action as deemed appropriate.

DATE:

I understand the need to protect my password. I will NOT share my password/and/or user ID. If I no longer need access to the CCR Tools, it is my responsibility to notify DLIS.

USER SIGNATURE

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Printed Name:		
Social Security Number		
DLA Standard LOGON (if DLA employee):		
Email Address		
Commercial Phone:	DSN:	
Personal Identification Information:		
Mother's maiden name:		
Block 3. Security Verification		
If you are a DoD employee you must have this blo Requests. If received without annotation and sign		
Verification of Security for requester name	ed in Block 2:	
Employee Name:		
Type of Investigation: Co	ompleted on:	

By (Agency):	
ADP Level:	
Signature of Security Representative: :	
Typed Name of Security Printed Name:_	
Title:	Date:
Commercial Phone:	DSN:
Block 4. Supervisory Approval.	
	. Registration forms received without this information wil
I agree that the employee named in this block nedata that is found in the CCR Tools web applications.	eds access to Proprietary or Proprietary and Sensitive on to perform their job duties.
Signature of Approving Supervisor	
Printed Name of Supervisor	
Title:	Date:
Commercial Phone:	DSN:
Employee Name:	
Level of Access:	
Proprietary Information	
Proprietary and Financi	al Data (Sensitive Information)
Plack E. Daint of Contact Approval TO	DE COMPLETED BY OUR OFFICE (DUE)

Block 5. Point of Contact Approval. TO BE COMPLETED BY OUR OFFICE (DLIS). THIS IS FOR YOUR INFORMATION ONLY.

DoD Federal Agency employees requesting access to CCR Tools must be approved by the POC at the Defense Finance and Accounting Service:

Ms. Susan Carter, DFAS-HQS: Phone: 614-693-7929 FAX: 614-693-9050 Mr. Wayne Lambert, DFAS-CO, 614-693-6608 WAYNE.LAMBERT@DFAS.MIL

Non DoD employees requesting access to CCR Tools must be approved by the Defense eBusiness Program Office POC:

Ms. Lisa Romney, Phone: 703-767-6920 F	ax 703-767-0162
Signature of Approving Official:	
Printed Name:	
Title:	
Commercial Phone:	DSN:
Block 6. Non-Disclosure Agreemony the employee requesting access.	ent. This agreement must be signed and dated ess to CCR Tools.
	SCLOSURE AGREEMENT CCR INFORMATION
Registry (CCR), the Defense Logistic Infor authorized representatives of the United S Agreement ("Agreement") covers informati a mandate for federal contractors as descr Collection Improvement Act of 1996, Public	on dissemination (ID) source for the Central Contractor mation Service (DLIS) may disclose information to tates (U.S.) Government. This Non-Disclosure on provided to the Department of Defense (DoD) under libed in 48 CFR, Parts 204, 212, and 252 and the Debt of Law 104-134. The disclosure, of such information, to hall be in accordance with all conditions and limitations
years. The Data Receiver has a req	n DLIS and with an expected duration of juirement(s) for such data to perform certain tasks on ecause of this requirement(s), The Data Receiver is this Agreement.

- 3. DLIS hereby determines that disclosure of information described in paragraph 1 from the Central Contractor Registration (CCR) system (data described in the CCR Handbook) is necessary so that The Data Receiver may perform the duties required of them by the U. S. Federal Government.
- 4. DLIS shall grant access to information described in paragraph 1until such time as the information is no longer required for the performance of work on behalf of the U. S. Federal Government or The Data Receiver request termination of access or DLIS terminates access.
- 5. The Data Receiver accepts the obligations contained in this Agreement in consideration of being granted access to the information described in paragraph 1. The Data Receiver acknowledges that all obligations imposed by this agreement concerning the use and disclosure of such information apply for the duration of the requirement and at all times thereafter.
- 6. The Data Receiver agrees that it shall use the information described in paragraph 1 only for the purpose of the work required by the U. S. Federal Government and shall not use such data for commercial purposes.
- 7. The Data Receiver agrees it shall not disclose or provide access to information described in paragraph 1 to anyone unless it has verified that the recipient has been properly authorized to

receive such information, e.g., employees of The Data Receiver or contractors who have signed Employee/Subcontractor Non-Disclosure Agreements pursuant to this Agreement.

- 8. The Data Receiver agrees to adopt operating procedures and physical security measures to properly safeguard such information from unauthorized use and from disclosure or release to unauthorized third parties.
- 9. The Data Receiver agrees to return to DLIS all copies of any abstracts or extracts of data described in paragraph 1, of which it has possession pursuant to this Agreement, upon request of DLIS or the completion or termination of the tasks set forth by the U.S. Federal Government, whichever comes first.
- 10. The Data Receiver agrees to obtain a written agreement to honor the terms of the Agreement from each contractor, sub-contractor and employee of the contractor or subcontractor who will have access to such information before the contractor, sub-contractor or employee is allowed such access.
- 11. The Data Receiver hereby acknowledges that no contractor, sub-contractor, consultant or employee who will have access to such information is debarred, suspended or otherwise ineligible to perform on an U. S. Federal Government contract.
- 12. The Data Receiver hereby acknowledges that any violation or breach of this Agreement on the part of a contractor, sub-contractor, consultant or any employee of a contractor or sub-contractor shall constitute grounds for termination of access to such information; suit for damages; suit to enforce the Agreement, including but not limited to, application for a court order prohibiting disclosure or use of information in violation or breach of this Agreement; and or suit for civil fines or penalties. The Data Receiver further acknowledges that the unauthorized use, disclosure or retention of the information may constitute a violation of the U.S. criminal laws, including provisions of sections 641, 793, 794, and 1905, title 18 U. S. Code, and that nothing in this Agreement constitutes a waiver by the U. S. of the right to prosecute for any statutory violation.

,	Signature of acknowledging party
	Title of acknowledging party
	Date of acknowledgement